PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004									Ap	Application or Docket Number			
CLAIMS AS FILED - PART I									1/0/	3/	9991		
L		·	(Colum		(Column 2)			SMALL EI		OR		THAN ENTITY	
U.	S. NATIONAL	STAGE FEES	/	/2			]	RATE	FEE	7	RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300	1	BASIC FEE		OR	BASIC FEE	300	
EXAMINATION FEE .			Satisfies PCT Article 33(1)- (4) = \$50/\$100			other situations = \$ 100 / \$ 200	1	EXAM FEE	†	1	EXAM, FEE		
SEARCH FEE			U.S. is ISA = \$50/8 100 ALL other countries = \$200/\$400			ther situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			minu	ıs 100 =		/ 50 =		X \$ 125 =		1	X \$ 250 =	1200	
TOTAL CHARGEABLE CLAIMS			20 min	ius 20 =	•			X \$ 25 =	1	OR	X \$ 50 =		
INDEPENDENT CLAIMS			3 mi	inus 3 =				X \$ 100 =		ÓR	X \$ 200 =	<del>                                     </del>	
MU	LTIPLE DEPEN	IDENT CLAIM PR	ESENT	7				+ \$ 180 =	1	OR	+ \$ 360 =	360	
* 11	the difference	e in column 1 is	less than zero.	enter "0	in c	olumn 2	L	TOTAL		OR	TOTAL	6260	
	(Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST						-	SMALL	ENTITY	OTHER THAN TY OR SMALL ENTITY			
AMENDMENT A	1-405	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 20	Minus	<u> </u>	-0	=		X \$ 25 =		OR	X \$ 50 =	./	
	Independent	. 3	Minus	***	3	= /		X \$ 100 =	7	OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Γ	+ \$ 180 =	7	OR	+ \$ 360 ≠		
							T	OTAL ADDIT. FEE	t	OR	TOTAL ADDIT.		
		(Column 1)		( <b>Col</b> umi	n 21	(Column 3)				-	Ι, -		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	· ·		<b>a</b>	Γ	X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus *	**		=	7	K \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					1	+ \$ 180 =		OR	+ \$ 360 =			
							TC	TAL ADDIT. FEE		OR I	OTAL ADDIT. FEE		
** H	the "Highest Nun	um 1 is less than the on inder Previously Paid inder Previously Paid ber Previously Paid F	For in this space For in this space	E is less th	ian <b>20</b> °.	enter "20".	the ap	ppropriate box	in cotumn 1.				

FORM PTO-875 (Rev. 02/2005)

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